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						INEKE	ے ر	Deeney	(Depositor's name)	
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APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR			ATTORNEY DOCKET N		CONFIRMATION NO.	
10/673,659	Michael Gomer Stellje	es JR	•		9372	2454				
TITLE OF INVENTION	: EMBOSSED MULTI-	PLY FIBR	OUS STRUC	TURE PRODUCT AN	ID PI	ROCESS FOR MA	KING S	SAME		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE DUE		PREV. PAID ISSUE FE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300		\$0		\$1700	12/26/2007	
EXAMINER		ART UNIT		CLASS-SUBCLASS						
LONEY, DONALD J 1772				428-156000						
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PE	RINTED ON	THE PATENT (print of	or typ	e)				
(A) NAME OF ASSIC	GNEE			(B) RESIDENCE: (C	CITY		OUNTI	RY)	ocument has been filed for	
The Proofer + Cramble Company Cincinnati, Ott  Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual Corporation or other private group entity Government										
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5. Change in Entity Stat	us (from status indicated	l above)		, ,			- 112	<u> Д</u>		
	SMALL ENTITY statu			b. Applicant is no						
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Authorized Signature	Val			-		Date			1/8/7	
Typed or printed name			Juyen					58,283		
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